## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT** #

P93000079527 (6)

ROTOSO, INC.

## FILED Apr 14 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				_		T HORAFADA THE COLON THAT BOAR DONIN GOILS ODAN HORIZ IS	iri rikin il		
244 BARTON BLVD BARTON COMMONS ROCKLEDGE FL 32955		244 BARTON BLVD BARTON COMMONS ROCKLEDGE FL 32955		DO NOT WRITE IN THIS SPACE					
US		US				3. Date Incorporated or Qualified 11/17/1993			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	T A	pplied For	
21		26				65-0466587		ot Applicable	
Suite, Apt.		Suite, Apt. #, etc.						Additional equired	
City & State	)	City & State				No.		May Be	
Zip	Country	Z(p) Country				Trust Fund Contribution		to Fees	
24	25	29	30	<del>-</del>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
SOBRINO, JOSE A				81	Name				
244 BARTON BLVD			<u> </u>	62 Street Address (P.O. Box Number is Not Acceptable)					
BARTON COMMONS			L						
RO	CKLEDGE FL 32955		] '	83					
			ļī	B4	City	F-1  8	5 Zip	Code	
dd Disserant (	le the provisions of Sections 607 DI	02 and 607 1509 Florida Stati	too the ab		samad sa	orporation submits this statement for the purpose of cha	Doing i	to registered	
office or re	egistered agent, or both, in the Star	te of Florida. Such change was	authorized	by	the corpora	ration's board of directors. I hereby accept the appoint	ment as	registered	
	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Statu	ites.	•				
SIGNATURE .	Signature, typed or printed name of registered a	agent and lifte if applicable (NC	ITE: Registered	Apen	ner shutsnela te	guired when reinstating) DATE			
12. OFFICERS AND DIRECTORS			13.	13.		ADDITIONS/CHANGES TO OFFICERS AND DI	RECTOR	RS IN 12	
TITLE	DP	DELETE 1.		1.1 TITLE			Change	Addition	
NAME	SOBRINO, JOSE A		1.2 NAN	ΝE					
STREET ADDRESS	244 BARTON BLVD		1.3 STR	EET A	ADORESS				
CITY-ST-ZIP	A2-		1.4 CIT	Y- \$1	r- zip				
TITLE	ST DODGE DODGE	☐ DELETE	2.1 TITLE			Ц	Change	Addition	
NAME	SOBRINO, ROBIN M		2.2 NAME						
STREET ADDRESS	244 BARTON BLVD			2.3 STREET ADDRESS					
CITY-ST-ZIP	ROCKLEDGE FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		T-ZIP		Change	☐ Addition	
NAME		L otter	3.2 NAA				Onlinge	radition	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			3.4. CIT						
TITLE	DELETE			4.1 TITLE			Change	Addition	
NAME			4.2 NA	ME	İ				
STREET ADDRESS			4.3 STR	EET A	ADDRESS				
_CITY-ST-ZIP_			4.4 CfT	Y-\$1	r-ZIP				
TITLE	DELETE		5.1 TITU	5.1 TITLE			Change	☐ Addition	
NAME			5.2 NAA	ME		•			
STREET ADDRESS			5.3 STR	EET #	ADDRESS				
CITY-ST-ZIP			5.4 CiT	Y-ST	- ZiP				
TITLE		☐ DELETE	6.1 T(T)	.E		Ц	Change	L. Addition	
NAME			6.2 NAM	ME					
STREET ADDRESS			6.3 STR	EETA	ADDRESS				
CITY-ST-ZIP	artifuthat the information and the	with this films slice and a -CL.	6.4 CITY			in Section 119.07(3)(i), Florida Statutes. I further certify	that the	information	
indicated of officer or of	on this annual report or supplemen	ntal annual report is true and ac acciver or trustee empowered to	curate and	tha	it my s <del>i</del> gnat	in section 113.07(3), Florida Statutes. I furnish certify ture shall have the same legal effect as if made under squired by Chapter 607, Florida Statutes; and that my r	oath; tha	at I am an	